

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN7941	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/30/2014
NAME OF PROVIDER OR SUPPLIER DOVE HEALTH & REHAB OF COLLIERVILLE, L		STREET ADDRESS, CITY, STATE, ZIP CODE 490 WEST POPLAR AVENUE COLLIERVILLE, TN 38017		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 629	<p>1200-8-6-.06(3)(b)8. Basic Services</p> <p>(3) Infection Control.</p> <p>8. Water pitchers, glasses, thermometers, emesis basins, douche apparatus, enema apparatus, urinals, mouthwash cups, bedpans and similar items of equipment coming into intimate contact with residents shall be disinfected or sterilized after each use unless individual equipment for each is provided and then sterilized or disinfected between residents and as often as necessary to maintain them in a clean and sanitary condition. Single use, resident disposable items are acceptable but shall not be reused.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #31</p> <p>Tennessee Code Annotated 68-11-804(c)31: All nursing homes shall disinfect contaminated articles and surfaces, such as mattresses, linens, thermometers and oxygen tents.</p> <p>Based on review of job descriptions, observation and interview, it was determined the facility failed to disinfect contaminated articles and surfaces as evidenced by a dried brown substance on the potty chairs and wheelchair seats and an uncovered nebulizer mask in 4 of 51 (Rooms 203, 204, 208 and 218) resident rooms.</p> <p>The findings included:</p> <p>1. Review of the facility's contracted housekeeping services policy documented, "...cleans and disinfects wheelchairs as</p>	N 629	<p>N626</p> <p>On 11-6-14 Housekeeping cleaned the edges and corners of room 216.</p> <p>On 11-6-14 Housekeeping cleaned the edges and corners of the bathroom floor in room 218.</p> <p>On 11-5-14 Housekeeping cleaned the commode chair over the commode in the bathroom of room 218.</p> <p>On 11-6-14 the floor in the front of the commode of room 223 was repaired by Maintenance.</p> <p>On 11-11-14 Housekeeping cleaned the corners and edges of the floor in room 320.</p> <p>On 11-11-14 the cove base of the bathroom floor in room 324 was cleaned by Housekeeping.</p> <p>On 11-11-14 the Housekeeping Supervisor cleaned room 325.</p> <p>The room deodorizers were removed from room 325 on 10-31-14 by Director of Nursing.</p> <p>2. On 10-31-14 the Housekeeping Supervisor conducted an audit of 51 of 51 resident rooms and bathrooms was conducted to ensure the cleanliness of the corners, edges, cove base, walls, and commode chairs; issues identified were addressed at that time.</p> <p>On 10-31-14 Maintenance was conducted an audit of 51 of 51 resident rooms in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched; issues identified will be addressed at that time.</p> <p>On 10-31-14 an audit of 51 of 51 residents rooms was conducted percutaneous endoscopy gastrostomy tube syringes by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage.</p>	

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Felix Strickland

ADMINISTRATOR

11/26/2014

STATE FORM

6899

WHK011

If continuation sheet 1 of 11

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Division of Health Care Facilities

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N 629	Continued From page 1 necessary and assigned..." Review of the the facility's housekeeper / aide job description documented, "...The Housekeeper / Aide Provides cleaning services within the facility to promote sanitary, comfortable and homelike environment for residents, staff and the public..." 2. Observations on the 200 hall revealed the following: a. Room 203 - on 10/26/14 at 4:42 PM and on 10/27/14 at 7:55 AM - a wheel chair at the bedside had a dried brown substance in the seat. b. Room 204 - on 10/26/14 at 9:20 AM - a nebulizer mask uncovered laying on top of the nebulizer machine. c. Room 208 - on 10/27/14 at 8:05 AM - the potty chair over the commode had dried brown substance inside around the rim. d. Room 218 - on 10/27/14 at 8:05 AM - a potty chair over the commode had dried brown substance inside of the rim. During an interview while touring the 200 hall on 10/30/14 at 4:35 PM, the administrator was asked if he saw the housekeeping and cleanliness issues with the rooms. The administrator nodded his head in confirmation.	N 629	On 10-31-14 an audit of 51 of 51 rooms nebulizer masks was conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. On 10-31-14 an audit was conducted of 51 of 51 resident rooms by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure nutritional supplements is not stored at the bedside. 3. On 11-7-14 the Housekeeping Supervisor was in-serviced by the Administrator in regards to the cleanliness of the corners, edges, cove base, walls, and commode chairs. On 11-10-14 the Housekeepers were in-serviced by the administrator in regards to the cleanliness of the corners, edges, cove base, walls, and commode chairs. On 11-7-14 the Maintenance Supervisor was in-serviced by the Administrator in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched. On 11-10-14 the Maintenance Assistant was in-serviced by the Maintenance Director in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched. On 11-20-14 the licensed nurses were in-serviced by the Staff Development Coordinator in regards to the storage of percutaneous endoscopy gastrostomy tube syringes, nebulizer masks, and nutritional supplements.	
N 645	1200-8-6-.06(3)(k) Basic Services (3) Infection Control. (k) Space and facilities for housekeeping equipment and supply storage shall be provided in each service area. Storage for bulk supplies and equipment shall be located away from patient care areas. The building shall be kept in good	N 645		

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N 645	<p>Continued From page 2</p> <p>repair, clean, sanitary and safe at all times.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #19</p> <p>Tennessee Code Annotated 68-11-804(c)19: The nursing home shall be clean and sanitary and in good repair at all times.</p> <p>Based on review of job descriptions, observation and interview, it was determined the facility failed to ensure housekeeping and maintenance services maintained a clean, sanitary, orderly and comfortable environment in residents' rooms as evidenced by missing hooks on privacy curtains, bathroom floors dirty and with build up in the corners and under sinks, paint splatters on the bathroom floors, peeling paint, dried brown substance on the toilet seats and wheelchair seats, an uncovered nebulizer mask, and strong odors in 17 of 51 (Room 114, 120, 124, 200, 201, 202, 203, 204, 205, 206, 208, 216, 218, 223, 320, 324 and 325) resident rooms.</p> <p>The findings included:</p> <p>1. Review of the facility's contracted housekeeping services job description documented, "...Cleans floor in residents' room: Dry mops, wet mops, sweep and disinfects... Cleans bathrooms in residents' rooms: Cleans and disinfects sinks, mirrors, pipes; the commode tank, bowl and base; then all fixtures, floors, and walls as directed... cleans and disinfects wheelchairs as necessary and assigned..."</p> <p>Review of the the facility's "Housekeeper/Aide Job Description... Environmental Services"</p>	N 645	<p>On 10-31-14 Maintenance replaced the privacy curtain and hooks in room 200.</p> <p>On 10-31-14 Housekeeping cleaned the floor, edges, corners, and cove base of room 201.</p> <p>On 11-10-14 Maintenance cleaned and repaired the area behind the commode in the bathroom of room 201.</p> <p>On 11-10-14 Housekeeping cleaned the edges, corners, cove base, and threshold in the bathroom of room 202.</p> <p>On 10-31-14 Housekeeping cleaned the wheel chair in room 203.</p> <p>On 10-31-14 the percutaneous endoscopy gastrostomy syringe and nebulizer mask in room 204 were discarded and replaced by director of nursing.</p> <p>On 10-26-14 the nutritional supplements in room 204 were removed and discarded by director of nursing.</p> <p>On 10-31-14 Housekeeping cleaned the wall above the bedside, corners, and edges of the bathroom in room 204.</p> <p>On 10-31-14 Housekeeping cleaned the corners of the bathroom in room 205.</p> <p>On 10-31-14 the Housekeeping Supervisor cleaned the corners of room 206.</p> <p>On 10-4-14 the Housekeeping Supervisor cleaned the edges and corners in the room of 208 and the edges and corners in the bathroom of 208.</p> <p>On 11-10-14 Maintenance replaced the cove base on the corner wall, removed the paint spots on the floor, and repainted the door facing going into the bathroom of room 208.</p> <p>On 11-5-14 Housekeeping cleaned the commode chair over the commode in the bathroom of room 208.</p>	

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N 645	<p>Continued From page 3</p> <p>documented, "...The Housekeeper/Aide Provides cleaning services within the facility to promote sanitary, comfortable and homelike environment for residents, staff and the public..."</p> <p>2. Observations on the 100 hall revealed the following: a. Room 114 - on 10/27/14 at 3:37 PM - paint splatters on the bathroom floor. b. Room 120 - on 10/27/14 at 3:29 PM - dirt build up and paint splatters on the floor around the edges of the bathroom and corners. c. Room 124 - on 10/27/14 at 3:33 PM - commode chair over the toilet has a rusty back support rod and rust noted on the legs of the chair, paint peeling off the toilet seat, dirty build up on the cove base in corners of the bathroom.</p> <p>3. Observations on the 200 hall revealed the following: a. Room 200 - on 10/26/14 at 9:10 AM - privacy curtain had missing hooks and was hanging from the rack. b. Room 201 - on 10/26/14 at 9:00 AM - Smells of urine, the bathroom floor dirty with build up around the edges and in the corners, the wall behind the commode has been repaired with white spackling with a black substance and a musty smell with the appearance of mold. On 10/26/14 at 12:35 PM and 3:30 PM - A black substance with the appearance of mold on the wall in bathroom behind the commode and a strong urine odor in the room. On 10/27/14 at 8:27 AM - strong offensive odor in the room, the floor with dirty build up below cove base and in corners of the room.</p> <p>During an interview in room 201 on 10/26/14 at 9:10 AM, Nurse #7 was asked what the black substance on the bathroom wall looked like.</p>	N 645	<p>4. Beginning the week of 11-23-14 audits of resident rooms and bathrooms to ensure the cleanliness of the corners, edges, cove base, walls, and commode chairs will be conducted by the Housekeeping Supervisor. The audits will be conducted 3 times a week for 4 weeks, 1 time a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of resident rooms in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched will be conducted by the Maintenance Supervisor. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of percutaneous endoscopy gastrostomy tube syringes will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of nebulizer masks will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of resident rooms will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure nutritional supplements are not stored</p>	

Division of Health Care Facilities

STATE FORM

6899

WHK011

If continuation sheet 4 of 11

Division of Health Care Facilities

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N 645	Continued From page 4 Nurse #7 stated, "Looks like mold." c. Room 202 - on 10/26/14 at 9:15 AM - the bathroom floor was dirty with dirt build up around the edges and in the corners with pieces of paper towel on the floor. On 10/26/14 at 12:37 PM - the bathroom with build up around the cove base on the floor and across the threshold. d. Room 203 - on 10/26/14 at 4:42 PM and on 10/27/14 at 7:55 AM - a wheel chair at the bedside had a dried brown substance in the seat. e. Room 204 - on 10/26/14 at 9:20 AM - an uncovered Percutaneous Endoscopy Gastrostomy (PEG) syringe laying on the bedside table, the wall above the bedside had dried splatters of yellowish brown spots with the appearance of nutritional supplement (6 cans of of nutritional supplement on the bed side table), a nebulizer mask uncovered laying on top of the nebulizer machine and the bathroom floor was dirty around the edges of the wall and in the corner. f. Room 205 - on 10/27/14 at 7:57 AM - bathroom floor has dirt build up in the corners. g. Room 206 - on 10/26/14 at 9:25 AM - dirt build up in the floor in the corners of the room along the wall. h. Room 208 - on 10/26/14 at 9:30 AM - dirt around the edges and in the corners of the floor in the room. The cove base was missing on the corner of the wall beside the door. The bathroom had dirt build up around the edges and in the corner of the floor. Paint spots on the floor and paint peeling from the door facing going into the bathroom. On 10/27/14 at 8:05 AM the bathroom floor dirty with build up around the edges and in the corners, and the potty chair over the commode had dried brown substance inside around the rim. i. Room 216 - on 10/27/14 at 10:00 AM - the	N 645	at the bedside. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter. The results of the audits will be reviewed by the Quality Assurance Performance Improvement Committee monthly for 3 months. The Administrator is responsible for monitoring and compliance. Date of Compliance: 11-28-14	11-28-14

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N 645	Continued From page 5 bathroom floor has dirt around the edges and build up in the corners. j. Room 218 - on 10/27/14 at 8:05 AM - the bathroom floor dirty with dirt build up around the edges and in the corners, a potty chair over the commode had dried brown substance inside of the rim. k. Room 223 - on 10/26/14 at 11:56 AM and 3:22 PM, and on 10/27/14 at 8:09 AM and 2:45 PM - the floor in front of the commode in the bathroom with dry, liquid stains noted. 4. Observations on the 300 hall revealed the following: a. Room 320 - on 10/27/14 at 3:16 PM - bathroom floor had dirt build up around the edges and the corners. b. Room 324 - on 10/26/14 at 3:53 PM - dirty build up around the cove base on the bathroom floor. c. Room 325 - on 10/26/14 at 12:48 PM and 4:25 PM, on 10/27/14 at 2:57 PM, and on 10/28/14 at 8:15 AM - very strong odor in room. There were 6 room deodorizers in this room, 1 was on the shelf beside the resident in the A bed and 5 were on a tall shelf in front of the resident in the A bed. During an interview in room 325 on 10/27/14 at 6:25 PM, the housekeeping supervisor was questioned about the odor in this resident's room. The housekeeping supervisor stated, "Have tried everything with [pointing to resident in the A bed], it is him, he will not always let the certified nursing assistants [CNAs] clean him, try to clean his mattress when can, don't know what to do." The housekeeping supervisor confirmed there was an odor in room 325. During an interview in room 325 on 10/28/14 at 6:35 PM, CNA #4 confirmed there was an odor in	N 645	N645 On 11-6-14 Housekeeping cleaned the edges and corners of room 216. On 11-6-14 Housekeeping cleaned the edges and corners of the bathroom floor in room 218. On 11-5-14 Housekeeping cleaned the commode chair over the commode in the bathroom of room 218. On 11-6-14 the floor in the front of the commode of room 223 was repaired by Maintenance. On 11-11-14 Housekeeping cleaned the corners and edges of the floor in room 320. On 11-11-14 the cove base of the bathroom floor in room 324 was cleaned by Housekeeping. On 11-11-14 the Housekeeping Supervisor cleaned room 325. The room deodorizers were removed from room 325 on 10-31-14 by Director of Nursing. 2. On 10-31-14 the Housekeeping Supervisor conducted an audit of 51 of 51 resident rooms and bathrooms was conducted to ensure the cleanliness of the corners, edges, cove base, walls, and commode chairs; issues identified were addressed at that time. On 10-31-14 Maintenance was conducted an audit of 51 of 51 resident rooms in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched; issues identified will be addressed at that time. On 10-31-14 an audit of 51 of 51 residents rooms was conducted percutaneous endoscopy gastrostomy tube syringes by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage.	

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N 645	Continued From page 6 room 325. CNA #4 stated, "He [named resident] refuses care frequently, he is incontinent, will let me care for him, but he refuses to be cleaned up, have had difficulty with this resident refusing care." 5. During an interview while touring the 100, 200 and 300 halls on 10/30/14 at 4:35 PM, the administrator was asked if he saw the housekeeping and cleanliness issues with the halls and the rooms. The administrator nodded his head in confirmation.	N 645	On 10-31-14 an audit of 51 of 51 rooms nebulizer masks was conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. On 10-31-14 an audit was conducted of 51 of 51 resident rooms by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure nutritional supplements is not stored at the bedside. 3. On 11-7-14 the Housekeeping Supervisor was in-serviced by the Administrator in regards to the cleanliness of the corners, edges, cove base, walls, and commode chairs.	
N 728	1200-8-6-.06(6)(b) Basic Services (6) Pharmaceutical Services. (b) Such cabinets or drug rooms shall be kept securely locked when not in use, and the key must be in the possession of the supervising nurse or other authorized persons. This Rule is not met as evidenced by: Type C Pending Penalty #7 Tennessee Code Annotated 68-11-804(c)7: All internal and external medications and preparations intended for human use shall be stored separately. They shall be properly stored in medicine compartments, including cabinets on wheels, or drug rooms. Such cabinets or drug rooms shall be kept securely locked when not in use, and the key must be in the possession of the supervising nurse or other authorized persons then on duty. Poisons or external medications shall not be stored in the same compartment and shall be labeled as such.	N 728	On 11-10-14 the Housekeepers were in-serviced by the administrator in regards to the cleanliness of the corners, edges, cove base, walls, and commode chairs. On 11-7-14 the Maintenance Supervisor was in-serviced by the Administrator in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched. On 11-10-14 the Maintenance Assistant was in-serviced by the Maintenance Director in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched. On 11-20-14 the licensed nurses were in-serviced by the Staff Development Coordinator in regards to the storage of percutaneous endoscopy gastrostomy tube syringes, nebulizer masks, and nutritional supplements.	

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N 728	<p>Continued From page 7</p> <p>Based on observation and interview, it was determined the facility failed to ensure 2 of 5 (Nurses #2 and 4) medication nurses did not leave medications unattended and out of their sight.</p> <p>The findings included:</p> <p>1. Observations in Resident #120's room on 10/28/14 at 9:30 AM, revealed Nurse #2 placed prepared medications on the overbed table, walked to the hall to get a staff member to assist in pulling this resident up in the bed, assisted this resident up in the bed, and washed her hands in the bathroom. Nurse #2 left the medications unattended and out of sight as she left the room to get a staff member and while she was in the bathroom washing her hands.</p> <p>2. Observations in Resident #63's room on 10/28/14 at 10:19 AM, revealed Nurse #4 placed medications on the overbed table, went into the bathroom to wash her hands, and left the medications on the overbed table unattended and out of sight.</p> <p>3. During an interview in the staff development room on 10/29/14 at 4:35 PM, the Director of Nursing (DON) was asked about medications being left unattended. The DON stated, "They [medications] should not be left unattended."</p>	N 728	<p>On 10-31-14 Maintenance replaced the privacy curtain and hooks in room 200.</p> <p>On 10-31-14 Housekeeping cleaned the floor, edges, corners, and cove base of room 201.</p> <p>On 11-10-14 Maintenance cleaned and repaired the area behind the commode in the bathroom of room 201.</p> <p>On 11-10-14 Housekeeping cleaned the edges, corners, cove base, and threshold in the bathroom of room 202.</p> <p>On 10-31-14 Housekeeping cleaned the wheel chair in room 203.</p> <p>On 10-31-14 the percutaneous endoscopy gastrostomy syringe and nebulizer mask in room 204 were discarded and replaced by director of nursing.</p> <p>On 10-26-14 the nutritional supplements in room 204 were removed and discarded by director of nursing.</p> <p>On 10-31-14 Housekeeping cleaned the wall above the bedside, corners, and edges of the bathroom in room 204.</p> <p>On 10-31-14 Housekeeping cleaned the corners of the bathroom in room 205.</p> <p>On 10-31-14 the Housekeeping Supervisor cleaned the corners of room 206.</p> <p>On 10-4-14 the Housekeeping Supervisor cleaned the edges and corners in the room of 208 and the edges and corners in the bathroom of 208.</p>	
N 765	<p>1200-8-6-.06(9)(i) Basic Services</p> <p>(9) Food and Dietetic Services.</p> <p>(i) Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of</p>	N 765	<p>On 11-10-14 Maintenance replaced the cove base on the corner wall, removed the paint spots on the floor, and repainted the door facing going into the bathroom of room 208.</p> <p>On 11-5-14 Housekeeping cleaned the commode chair over the commode in the bathroom of room 208.</p>	

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN7941	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/30/2014
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NAME OF PROVIDER OR SUPPLIER DOVE HEALTH & REHAB OF COLLIERVILLE, L	STREET ADDRESS, CITY, STATE, ZIP CODE 490 WEST POPLAR AVENUE COLLIERVILLE, TN 38017
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N 765	<p>Continued From page 8</p> <p>contamination whether in storage or while being prepared and served and/or transported through hallways.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #22</p> <p>Tennessee Code Annotated 68-11-804(c)22: Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination, whether in storage or while being prepared and served and/or transported through hallways.</p> <p>Based on policy review, observation and interview, it was determined the facility failed to ensure practices to prevent the potential spread of infection were maintained by 2 of 24 staff members (Certified Nursing Assistant (CNA) #2 and 3) during dining observations and failed to ensure expired milk was not served, which could have affected 2 of the 20 residents eating in the fine dining room.</p> <p>The findings included:</p> <p>1. Review of the facility's hand hygiene policy documented, "...Assume every person is potentially infected or colonized with organisms that could be transmitted in the facility and apply the following infection control practices... GUIDELINES... 5. If hands are not visibly soiled, alcohol-based hand rubs are preferred for hand hygiene: A. Before having direct contact with residents... C. After contact with resident's intact skin... E. After contact with inanimate objects..."</p> <p>a. Observations in Resident #97's room on 10/28/14 at 8:00 AM, revealed CNA #2 was assisting Resident #97 with the breakfast meal.</p>	N 765	<p>4. Beginning the week of 11-23-14 audits of resident rooms and bathrooms to ensure the cleanliness of the corners, edges, cove base, walls, and commode chairs will be conducted by the Housekeeping Supervisor. The audits will be conducted 3 times a week for 4 weeks, 1 time a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of resident rooms in regards to paint splatters on the floors, privacy curtain hooks, commode seats, commode chairs over the commodes, door facings going into the bathrooms, cove base in the rooms, an areas in the wall that have been patched will be conducted by the Maintenance Supervisor. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of percutaneous endoscopy gastrostomy tube syringes will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of nebulizer masks will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure proper storage. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning the week of 11-23-14 audits of resident rooms will be conducted by the Registered Nurse Supervisor, Staff Development Coordinator, and Assistant Director of Nursing to ensure nutritional supplements are not stored</p>	

Division of Health Care Facilities

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N 765	<p>Continued From page 9</p> <p>CNA #2 got up and repositioned Resident #18, then returned and continued to assist Resident #97 without performing hand hygiene.</p> <p>During an interview in the staff development room on 10/29/14 at 7:35 AM, the Assistant Director of Nursing (ADON) was asked what she expects staff to do when assisting to feed a resident and repositioning another resident. The ADON stated, "Clean their hands and I prefer them to wash their hands."</p> <p>b. Observations in Resident #55's room on 10/26/14 at 12:30 PM, CNA #3 placed a meal tray on the overbed table, applied gloves, assisted Resident #55 up in the bed, touching the resident and the bed, removed her gloves, without performing hand hygiene and continued to set up the tray.</p> <p>During an interview in the staff development room on 10/29/14 at 4:35 PM, the Director of Nursing (DON) was asked what should staff do after touching residents, in between glove use, and passing meal trays. The DON stated, "Should perform hand hygiene."</p> <p>2. Observations in the fine dining room on 10/26/14 at 12:30 PM, revealed 2 cartons of chocolate milk with an expiration date of 10/24/14 in a pan of ice to be served to residents with their lunch meal. There were 20 residents in the dining room for lunch.</p> <p>During an interview in the fine dining room on 10/26/14 at 1:12 PM, the Assistant Director of Nursing (ADON) was asked would you expect chocolate milk that is being served to be expired. The ADON stated, "No, it shouldn't be." The ADON then proceeded to remove it off the tray</p>	N 765	<p>at the bedside. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>The results of the audits will be reviewed by the Quality Assurance Performance Improvement Committee monthly for 3 months. The Administrator is responsible for monitoring and compliance.</p> <p>Date of Compliance: 11-28-14</p> <p>N728</p> <p>1. On 11-11-14 Nurses #2 and # 4 were in-serviced by the Staff Development Coordinator in regards to leaving medications unattended.</p> <p>2. On 11-14-14 medication pass audit by observation was conducted by Assistant Director of Nursing to ensure medications were not left unattended; no negative issues were identified.</p> <p>3. Beginning on 11-20-14 the licensed nurses were in-serviced by Consultant Pharmacist in regards to not leaving medications unattended and unsecured.</p> <p>Beginning 11-19-14 the licensed nurses were in-serviced by Staff Development Coordinator regarding not leaving medications unattended.</p> <p>4. Beginning on the week of 11-23-14 observational audits during medication administration will be conducted by the Registered Nurse Supervisor, Assistant Director of Nursing and/or Staff Development Coordinator to ensure medications are not left unattended or unsecured. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>The results of the audits will be reviewed by the Quality Assurance Performance Improvement Committee monthly for 3 months. The Director of Nursing is responsible for monitoring and compliance.</p>	<p>11- 28-14</p> <p>11- 28-14</p>

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N 765	Continued From page 10 and put them into the trash.	N 765	<p>1. CNA # 2 and CNA # 3 were in-serviced on 11-4-14 by the Staff Development Nurse in regards to hand hygiene, including emphasis on the washing of hands after each direct resident contact, after contact with inanimate objects/and or after the removal of gloves.</p> <p>Residents # 97 and # 55 were assessed by Director of Nursing on 10-31-14; no negative issues were identified.</p> <p>The chocolate milk was discarded on 10-26-14 by the Assistant Director of Nursing.</p> <p>2. An observational audit of the meal service was conducted on 11-3-14 by Staffing Development Coordinator to ensure hand hygiene was conducted per requirements; no negative issues were identified at that time.</p> <p>On 10-26-14 and 11-12-14, an audit of the expiration dates of milk was conducted by the Dietary Manager; no negative issues were identified.</p> <p>3. Beginning on 11-23-14 the Staff Development Coordinator and the Assistant Director of Nursing in-serviced and performed hand hygiene skills checks with the nursing staff.</p> <p>On 11-12-14 the Administrator in-serviced the Dietary Manager in regards to checking the expiration dates of milk.</p> <p>On 11-12-14 the Administrator in-serviced the dietary staff in regards to checking the expiration dates of milk.</p> <p>4. Beginning on the week of 11-23-14 an observational audit of the meal service will be conducted by the Registered Nurse Supervisor, Assistant Director of Nursing, Director of Nursing, Staff Development Nurse, and/ or the Central Supply Nurse to ensure hand hygiene is performed per requirements. The observational audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>Beginning on the week of 11-23-14 an audit of expiration dates of milk will be conducted by the Dietary Manager. The audits will be conducted 3 times a week for 4 weeks, 1 times a week for 4 weeks, monthly for 1 month, then quarterly thereafter.</p> <p>The results of the audits will be reviewed by the Quality Assurance Performance Improvement Committee monthly for 3 months. The Administrator is responsible for monitoring and compliance.</p>	11-28-14

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